SHOW-ME BENEFIT CONSORTIUM

Lebanon
2026-27 Benefits



JACKETS

Show-Me Benefit Consortium

Contact Us

Show-Me Health Administrators (SMHA)

- Medical claims payment and customer service for network and claims
- Local service number located on the back of your Medical ID card
- **(844) 682-1545 or customerservice@showmeadmin.com**

Health Plan Management Group (HPMG)

- Customer Service for benefits: medical plans, pharmacy, dental, vision, life, etc.
- Local service number
- **(417)893-8437 or info@hpmg-llc.com**

Sav-RX

- Pharmacy Benefit Manager - prescription coverage
- Number also located on the front of your Medical ID card under “Pharmacy Plan”
- **(800) 228-3108**

MedVed Inc.

- Specialty and high-cost medication program manager
- Local service number
- **(417) 201-6047 or info@medvedinc.com**

Ameritas

- Dental PDP Plus and Vision VSP (no ID card required)
- **(800) 487-5553**

zConnect Mobile App

- Free, all-inclusive mobile application providing 24/7 access to your health plan information and much more
- List of all contact us phone numbers in the app under “Services”

First Stop Health

- Free virtual care by board-certified doctors available 24/7 via phone or video
- Number also located on the back of your Medical ID card under “Virtual Care”
- **(888) 691-7867 or visit www.firststophealth.com click “Get Care Now”**

Encompass EAP

- Employee assistance program includes 5 free sessions per year, per issue
- **(800)788-8630**

SHOW-ME BENEFIT CONSORTIUM

Plan Offerings

2026-27

$1,000 Mercy PPO			
Coverage Tier	Monthly Cost		
	EE Cost	ER Cost	Total Cost
EE	$197.00	$577.00	$774.00
ES	$1,048.00	$577.00	$1,625.00
ECH	$785.00	$577.00	$1,362.00
FAM	$1,582.00	$577.00	$2,159.00

$3,500 Mercy PPO			
Coverage Tier	Monthly Cost		
	EE Cost	ER Cost	Total Cost
EE	$0.00	$577.00	$577.00
ES	$657.00	$577.00	$1,234.00
ECH	$458.00	$577.00	$1,035.00
FAM	$1,064.00	$577.00	$1,641.00

$3,400 Mercy HDHP				
Coverage Tier	Monthly Cost			
	EE Cost	ER Cost	Total Cost	
EE	$0.00*	$577.00	$558.00	*$19.00 goes to an H.S.A. account
ES	$614.00*	$577.00	$1,172.00	*$19.00 goes to an H.S.A. account
ECH	$424.00*	$577.00	$982.00	*$19.00 goes to an H.S.A. account
FAM	$998.00*	$577.00	$1,556.00	*$19.00 goes to an H.S.A. account

$1,000 Cox PPO			
Coverage Tier	Monthly Cost		
	EE Cost	ER Cost	Total Cost
EE	$212.00	$577.00	$789.00
ES	$1,081.00	$577.00	$1,658.00
ECH	$813.00	$577.00	$1,390.00
FAM	$1,626.00	$577.00	$2,203.00

$3,500 Cox PPO			
Coverage Tier	Monthly Cost		
	EE Cost	ER Cost	Total Cost
EE	$11.00	$577.00	$588.00
ES	$681.00	$577.00	$1,258.00
ECH	$477.00	$577.00	$1,054.00
FAM	$1,095.00	$577.00	$1,672.00

$3,400 Cox HDHP				
Coverage Tier	Monthly Cost			
	EE Cost	ER Cost	Total Cost	
EE	$0.00*	$577.00	$569.00	*$8.00 goes to an H.S.A account
ES	$627.00*	$577.00	$1,196.00	*$8.00 goes to an H.S.A account
ECH	$433.00*	$577.00	$1,002.00	*$8.00 goes to an H.S.A account
FAM	$1,020.00*	$577.00	$1,589.00	*$8.00 goes to an H.S.A account

Plan Offerings

2026-27

$1,200 Cigna PPO			
Coverage Tier	Monthly Cost		
	EE Cost	ER Cost	Total Cost
EE	$236.00	$577.00	$813.00
ES	$1,129.00	$577.00	$1,706.00
ECH	$854.00	$577.00	$1,431.00
FAM	$1,691.00	$577.00	$2,268.00

$3,500 Cigna PPO			
Coverage Tier	Monthly Cost		
	EE Cost	ER Cost	Total Cost
EE	$85.00	$577.00	$662.00
ES	$813.00	$577.00	$1,390.00
ECH	$588.00	$577.00	$1,165.00
FAM	$1,270.00	$577.00	$1,847.00

$3,500 Cigna HDHP			
Coverage Tier	Monthly Cost		
	EE Cost	ER Cost	Total Cost
EE	$9.00	$577.00	$558.00
ES	$654.00	$577.00	$1,213.00
ECH	$454.00	$577.00	$1,031.00
FAM	$1,059.00	$577.00	$1,636.00

Dental Plan 1	
Coverage Tier	Monthly Cost
Employee	$28.68
Employee + Spouse	$56.44
Employee + Child(ren)	$73.48
Family	$110.88

Dental Plan 2	
Coverage Tier	Monthly Cost
Employee	$34.48
Employee + Spouse	$68.08
Employee + Child(ren)	$87.80
Family	$130.92

Dental Plan 3	
Coverage Tier	Monthly Cost
Employee	$39.84
Employee + Spouse	$78.80
Employee + Child(ren)	$99.20
Family	$148.64

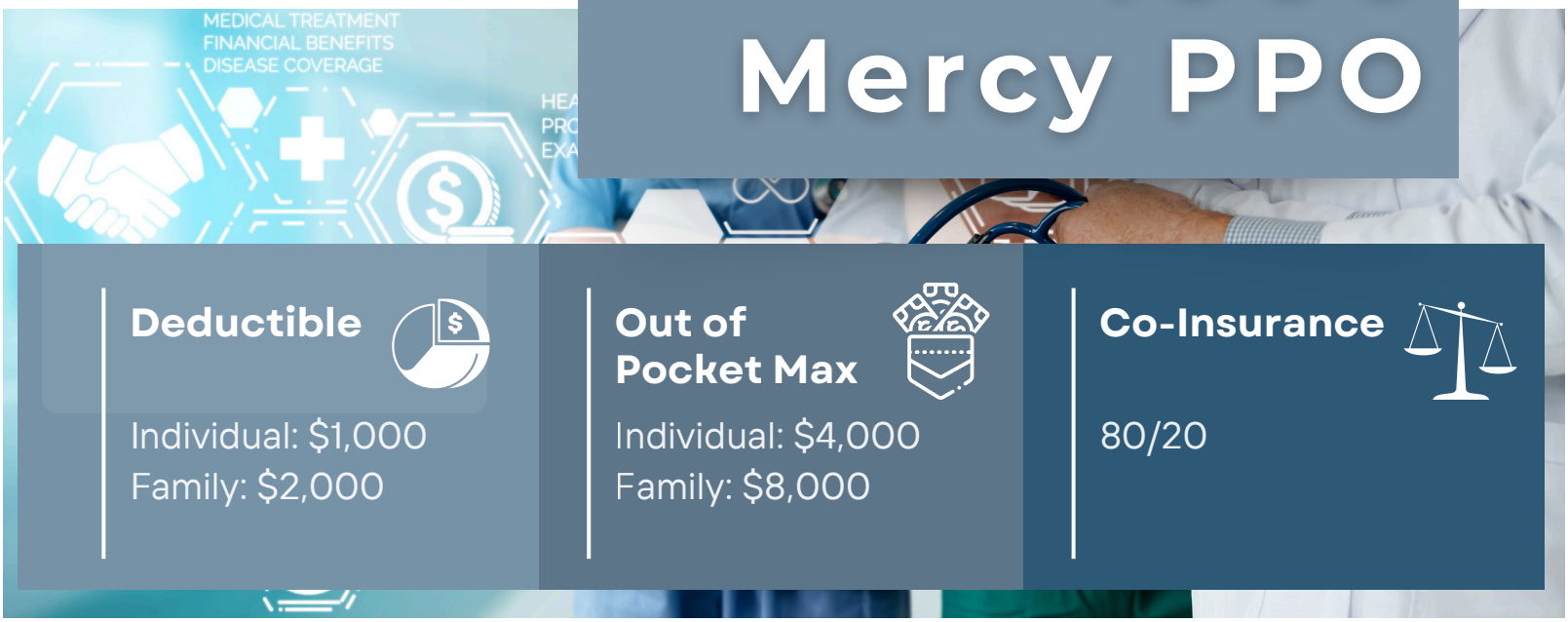
Dental Plan 4	
Coverage Tier	Monthly Cost
Employee	$42.16
Employee + Spouse	$83.40
Employee + Child(ren)	$101.00
Family	$154.56

Vision Plan 1	
Coverage Tier	Monthly Cost
Employee	$5.88
Employee + Spouse	$11.76
Employee + Child(ren)	$12.48
Family	$19.64

Vision Plan 2	
Coverage Tier	Monthly Cost
Employee	$8.88
Employee + Spouse	$17.80
Employee + Child(ren)	$19.84
Family	$30.20

SHOW-ME HEALTH ADMINISTRATORS

1000 Mercy PPO



Deductible

Individual: $1,000
Family: $2,000

Out of Pocket Max

Individual: $4,000
Family: $8,000

Co-Insurance

80/20

Copays/Coinsurance

First Stop Health Telemedicine	$0
Preventive Care	$0
PCP Copay	$20
Specialist Co-pay	$40
Urgent Care	$75
Emergency Room	$350
Non-Preventive Labs	Ded/Coins
Inpatient Services	Ded/Coins
Outpatient Services	Ded/Coins
In and out of office Surgeries	Ded/Coins

Pharmacy

Generic	$10
Formulary Brand	$35
Non-Formulary Brand	$75
International	$0

FAQ

- **Who pays my claims?**
  - Show-Me Health Administration
- **What services are free on my health plan?**
  - Preventive care
  - First Stop Health Telemedicine
  - International medications
- **Who manages my pharmacy benefit?**
  - Sav-RX (800) 228-3108
- **Who do I contact to find out if my physician is in network or if I have any questions on my benefits?**
  - zConnect App
  - Show-Me Health Administrators Customer Service
  - www.mercyoptions.net, choose SMBC under the employer group

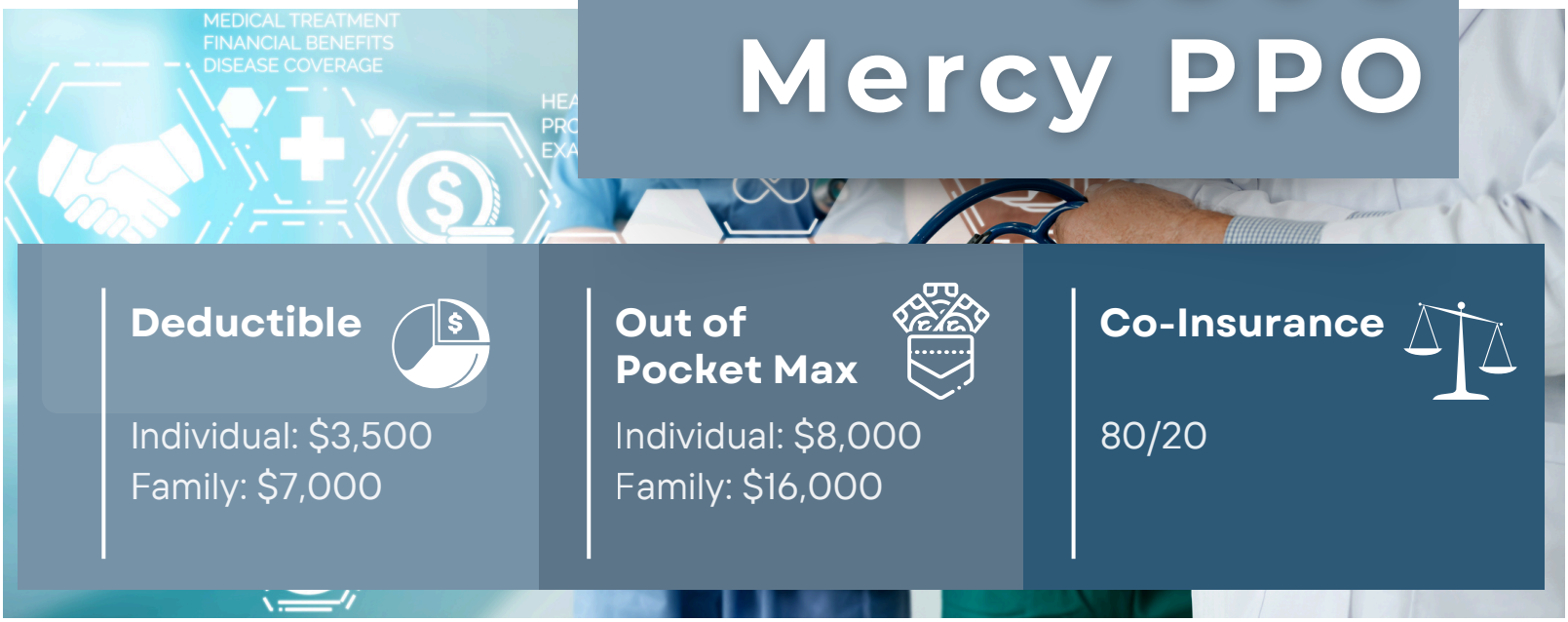
Contact Show-Me Health Administrators:

844-682-1545
customerservice@showmeadmin.com

SHOW-ME BENEFIT CONSORTIUM

SHOW-ME HEALTH ADMINISTRATORS

3500 Mercy PPO



Deductible

Individual: $3,500
Family: $7,000

Out of Pocket Max

Individual: $8,000
Family: $16,000

Co-Insurance

80/20

Copays/Coinsurance

First Stop Health Telemedicine	$0
Preventive Care	$0
PCP Copay	$20
Specialist Co-pay	$40
Urgent Care	$75
Emergency Room	$400
Non-Preventive Labs	Ded/Coins
Inpatient Services	Ded/Coins
Outpatient Services	Ded/Coins
In and out of office Surgeries	Ded/Coins

Pharmacy

Generic	$10
Formulary Brand	$35
Non-Formulary Brand	$75
International	$0

FAQ

- **Who pays my claims?**
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  - First Stop Health Telemedicine
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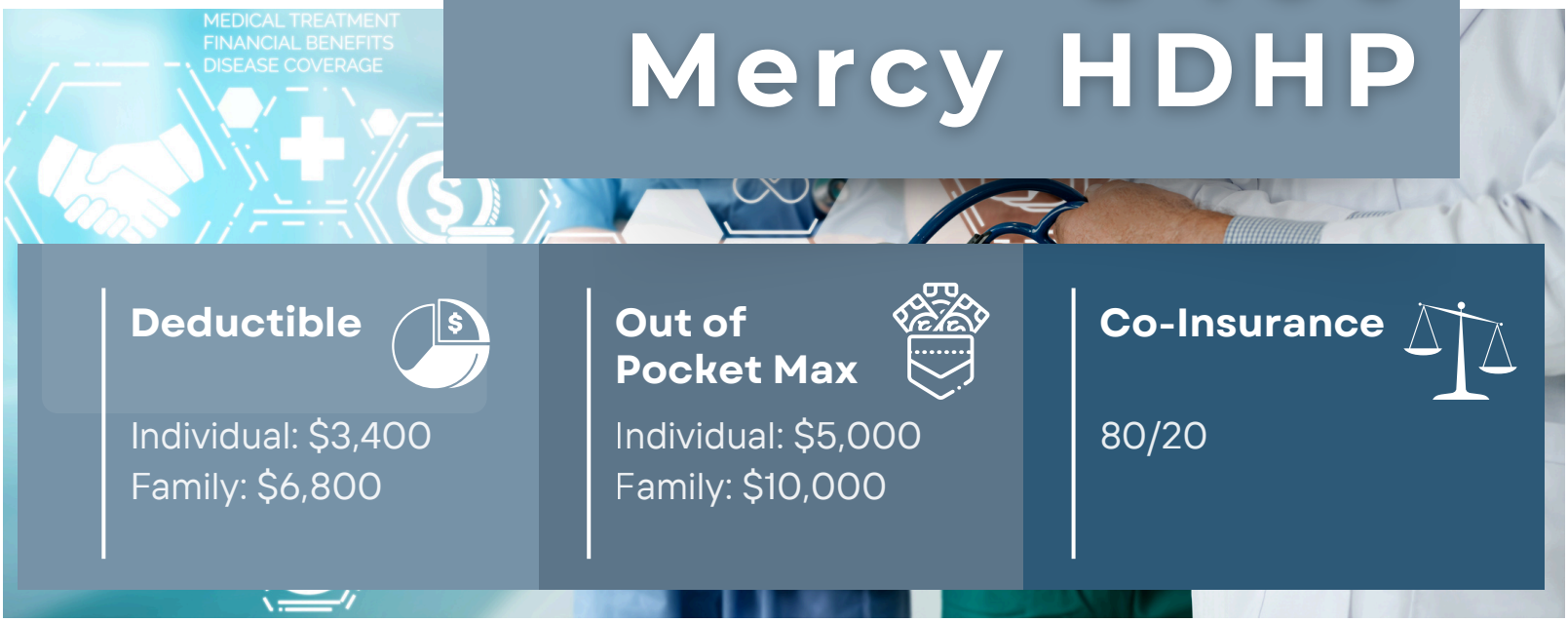
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SHOW-ME BENEFIT CONSORTIUM

SHOW-ME HEALTH ADMINISTRATORS

3400 Mercy HDHP



Deductible

Individual: $3,400
Family: $6,800

Out of Pocket Max

Individual: $5,000
Family: $10,000

Co-Insurance

80/20

Copays/Coinsurance

First Stop Health Telemedicine	$0
Preventive Care	$0
PCP Copay	Ded/Coins
Specialist Co-pay	Ded/Coins
Urgent Care	Ded/Coins
Emergency Room	Ded/Coins
Non-Preventive Labs	Ded/Coins
Inpatient Services	Ded/Coins
Outpatient Services	Ded/Coins
In and out of office Surgeries	Ded/Coins

Pharmacy

Generic	$10 AD*
Formulary Brand	$35 AD*
Non-Formulary Brand	$75 AD*
International	$0 AD*

*AD - After Deductible

FAQ

- **Who pays my claims?**
  - Show-Me Health Administration
- **What services are free on my health plan?**
  - Preventive care
  - First Stop Health Telemedicine
  - International medications
- **Who manages my pharmacy benefit?**
  - Sav-RX (800) 228-3108
- **Who do I contact to find out if my physician is in network or if I have any questions on my benefits?**
  - zConnect App
  - Show-Me Health Administrators Customer Service
  - www.mercyoptions.net, choose SMBC under the employer group

Contact Show-Me Health Administrators:

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SHOW-ME BENEFIT CONSORTIUM

SHOW-ME HEALTH ADMINISTRATORS

1000 Cox PPO



Deductible

Individual: $1,000
Family: $2,000

Out of Pocket Max

Individual: $4,000
Family: $8,000

Co-Insurance

80/20

Copays/Coinsurance

First Stop Health Telemedicine	$0
Preventive Care	$0
PCP Copay	$25
Specialist Co-pay	$50
Urgent Care	$75
Emergency Room	$350
Non-Preventive Labs	Ded/Coins
Inpatient Services	Ded/Coins
Outpatient Services	Ded/Coins
In and out of office Surgeries	Ded/Coins

Pharmacy

Formulary	$15
Formulary Brand	$35
Non-Preferred Brand	$75
International	$0

FAQ

- **Who pays my claims?**
  - Show-Me Health Administration
- **What services are free on my health plan?**
  - Preventive care
  - First Stop Health Telemedicine
  - International medications
- **Who do I contact if I have a question about Prescription medication?**
  - Sav-RX (800) 228-3108
- **Who do I contact to find out if my physician is in network or if I have any questions on my benefits?**
  - zConnect App
  - Show-Me Health Administrators Customer Service

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SHOW-ME BENEFIT CONSORTIUM

SHOW-ME HEALTH ADMINISTRATORS

3500 Cox PPO



Deductible

Individual: $3,500
Family: $7,000

Out of Pocket Max

Individual: $8,000
Family: $16,000

Co-Insurance

80/20

Copays/Coinsurance

First Stop Health Telemedicine	$0
Preventive Care	$0
PCP Copay	$25
Specialist Co-pay	$50
Urgent Care	$75
Emergency Room	$400
Non-Preventive Labs	Ded/Coins
Inpatient Services	Ded/Coins
Outpatient Services	Ded/Coins
In and out of office Surgeries	Ded/Coins

Pharmacy

Generic	$15
Formulary Brand	$35
Non-Formulary Brand	$75
International	$0

FAQ

- **Who pays my claims?**
  - Show-Me Health Administration
- **What services are free on my health plan?**
  - Preventive care
  - First Stop Health Telemedicine
  - International medications
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SHOW-ME BENEFIT CONSORTIUM

SHOW-ME HEALTH ADMINISTRATORS

3400 Cox HDHP



Deductible

Individual: $3,400
Family: $6,800

Out of Pocket Max

Individual: $5,000
Family: $10,000

Co-Insurance

80/20

Copays/Coinsurance

First Stop Health Telemedicine	$0
Preventive Care	$0
PCP Copay	Ded/Coins
Specialist Co-pay	Ded/Coins
Urgent Care	Ded/Coins
Emergency Room	Ded/Coins
Non-Preventive Labs	Ded/Coins
Inpatient Services	Ded/Coins
Outpatient Services	Ded/Coins
In and out of office Surgeries	Ded/Coins

Pharmacy

Generic	$10 AD*
Formulary Brand	$35 AD*
Non-Formulary Brand	$75 AD*
International	$0 AD*

*AD - After Deductible

FAQ

- **Who pays my claims?**
  - Show-Me Health Administration
- **What services are free on my health plan?**
  - Preventive care
  - First Stop Health Telemedicine
  - International medications
- **Who do I contact if I have a question about Prescription medication?**
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  - zConnect App
  - Show-Me Health Administrators Customer Service

Contact Show-Me Health Administrators:

844-682-1545
customerservice@showmeadmin.com

SHOW-ME BENEFIT CONSORTIUM

SHOW-ME HEALTH ADMINISTRATORS

1200 Cigna PPO



Deductible

Individual: $1,200
Family: $2,400

Out of Pocket Max

Individual: $3,600
Family: $7,200

Co-Insurance

80/20

Copays/Coinsurance

First Stop Health Telemedicine	$0
Preventive Care	$0
PCP Copay	$25
Specialist Co-pay	$50
Urgent Care	$50
Emergency Room	$200
Non-Preventive Labs	$0
Inpatient Services	Ded/Coins
Outpatient Services	Ded/Coins
In and out of office Surgeries	Ded/Coins

Pharmacy

Generic	$15
Formulary Brand	$35
Non-Formulary Brand	$75
International	$0

FAQ

- **Who pays my claims?**
  - Show-Me Health Administration
- **What services are free on my health plan?**
  - Preventive care
  - First Stop Health Telemedicine
  - International medications
- **Who do I contact if I have a question about Prescription medication?**
  - Sav-RX (800) 228-3108
- **Who do I contact to find out if my physician is in network or if I have any questions on my benefits?**
  - zConnect App
  - Show-Me Health Administrators Customer Service
  - https://sarhcpdir.cigna.com and choose “find a doctor”

Contact Show-Me Health Administrators:

844-682-1545
customerservice@showmeadmin.com

SHOW-ME BENEFIT CONSORTIUM

SHOW-ME HEALTH ADMINISTRATORS

3500 Cigna PPO



Deductible

Individual: $3,500
Family: $7,000

Out of Pocket Max

Individual: $5,500
Family: $11,000

Co-Insurance

80/20

Copays/Coinsurance

First Stop Health Telemedicine	$0
Preventive Care	$0
PCP Copay	$25
Specialist Co-pay	$35
Urgent Care	$50
Emergency Room	$200
Non-Preventive Labs	$0
Inpatient Services	Ded/Coins
Outpatient Services	Ded/Coins
In and out of office Surgeries	Ded/Coins

Pharmacy

Generic	$10
Formulary Brand	$35
Non-Formulary Brand	$60
International	$0

FAQ

- **Who pays my claims?**
  - Show-Me Health Administration
- **What services are free on my health plan?**
  - Preventive care
  - First Stop Health Telemedicine
  - International medications
- **Who do I contact if I have a question about Prescription medication?**
  - Sav-RX (800) 228-3108
- **Who do I contact to find out if my physician is in network or if I have any questions on my benefits?**
  - zConnect App
  - Show-Me Health Administrators Customer Service
  - https://sarhcpdir.cigna.com and choose “find a doctor”

Contact Show-Me Health Administrators:

844-682-1545
customerservice@showmeadmin.com

SHOW-ME BENEFIT CONSORTIUM

SHOW-ME HEALTH ADMINISTRATORS

3500 Cigna HDHP



Deductible

Individual: $3,500
Family: $7,000

Out of Pocket Max

Individual: $7,000
Family: $14,000

Co-Insurance

80/20

Copays/Coinsurance

First Stop Health Telemedicine	$0
Preventive Care	$0
PCP Copay	Ded/Coins
Specialist Co-pay	Ded/Coins
Urgent Care	Ded/Coins
Emergency Room	Ded/Coins
Non-Preventive Labs	Ded/Coins
Inpatient Services	Ded/Coins
Outpatient Services	Ded/Coins
In and out of office Surgeries	Ded/Coins

Pharmacy

Generic	$10 AD*
Formulary Brand	$35 AD*
Non-Formulary Brand	$75 AD*
International	$0 AD*

*AD - After Deductible

FAQ

- **Who pays my claims?**
  - Show-Me Health Administration
- **What services are free on my health plan?**
  - Preventive care
  - First Stop Health Telemedicine
  - International medications
- **Who do I contact if I have a question about Prescription medication?**
  - Sav-RX (800) 228-3108
- **Who do I contact to find out if my physician is in network or if I have any questions on my benefits?**
  - zConnect App
  - Show-Me Health Administrators Customer Service
  - https://sarhcpdir.cigna.com and choose “find a doctor”

Contact Show-Me Health Administrators:

844-682-1545
customerservice@showmeadmin.com

SHOW-ME BENEFIT CONSORTIUM

Ameritas

DENTAL PLAN 1



Plan Benefit

Type 1	100%
Type 2	80%
Type 3	NA

Summary

Deductible	$50/Calendar Year (Waived Type 1) $150/family
Maximum (per person)	$1,250/Calendar year
PPO	Passive PPO & Plus
Waiting Period	None

Monthly Cost

Employee	$28.68
Employee + Spouse	$56.44
Employee + Child(ren)	$73.48
Family	$110.88

FEATURES & BENEFITS

DENTAL NETWORK

Ameritas offers coverage at any dentist. Find an in-network provider at dentalnetwork.ameritas.com under "Classic (PPO) & Plus".

DEDUCTIBLES

After $150 in deductibles, the rest are waived for the year. No family member can exceed the selected deductible amount.

COST ESTIMATOR

Members can use the estimator for procedure charges and request a pretreatment estimate from their dentist.

WORLDWIDE SUPPORT

AXA Assistance provides provider referrals and appointment help for dental emergencies. Contact info is in the member account.

HEALTH SCORECARD

View your Dental Health Report Card in your member account for your health score and improvement tips. Log in at ameritas.com!

800-487-5553 group@ameritas.com www.ameritas.com

Ameritas

DENTAL PLAN 2



Plan Benefit

Type 1	100%
Type 2	80%
Type 3	50%

Monthly Cost

Employee	$34.48
Employee + Spouse	$68.08
Employee + Child(ren)	$87.80
Family	$130.92

Summary

Deductible	$50/Calendar Year (Waived Type 1) $150/family
Maximum (per person)	$1,250/Calendar year
PPO	Passive PPO & Plus
Waiting Period	None
Annual Open Enrollment	Included

Orthodontia

Plan Benefit	50%
Coverage	Children under 19 only
Lifetime Max.	$1,000
Waiting Period	None
Takeover Benefit	Initial Insureds

FEATURES & BENEFITS

DENTAL NETWORK
Ameritas offers coverage at any dentist. Find an in-network provider at dentalnetwork.ameritas.com under "Classic (PPO) & Plus".

WORLDWIDE SUPPORT
AXA Assistance provides provider referrals and appointment help for dental emergencies. Contact info is in the member account.

ORTHODONTIA
Ameritas covers current orthodontic treatment up to its maximum, minus prior benefits, for initial employees and dependents only.

DEDUCTIBLES
After $150 in deductibles, the rest are waived for the year. No family member can exceed the selected deductible amount.

COST ESTIMATOR
Members can use the estimator for procedure charges and request a pretreatment estimate from their dentist.

HEALTH SCORECARD
View your Dental Health Report Card in your member account for your health score and improvement tips. Log in at ameritas.com!

800-487-5553 group@ameritas.com www.ameritas.com

Ameritas

DENTAL PLAN 3



Plan Benefit

Type 1	100%
Type 2	100%
Type 3	80%

Monthly Cost

Employee	$39.84
Employee + Spouse	$78.80
Employee + Child(ren)	$99.20
Family	$148.64

Summary

Deductible	$25/Calendar Year (Waived Type 1)
Maximum (per person)	$1,250/Calendar year
PPO	Passive PPO & Plus
Waiting Period	None
Annual Open Enrollment	Included

Orthodontia

Plan Benefit	50%
Coverage	Children under 19 only
Lifetime Max.	$1,000
Waiting Period	None
Takeover Benefit	Initial Insureds

FEATURES & BENEFITS

DENTAL NETWORK
Ameritas offers coverage at any dentist. Find an in-network provider at dentalnetwork.ameritas.com under "Classic (PPO) & Plus".

WORLDWIDE SUPPORT
AXA Assistance provides provider referrals and appointment help for dental emergencies. Contact info is in the member account.

ORTHODONTIA
Ameritas covers current orthodontic treatment up to its maximum, minus prior benefits, for initial employees and dependents only.

COST ESTIMATOR
Members can use the estimator for procedure charges and request a pretreatment estimate from their dentist.

HEALTH SCORECARD
View your Dental Health Report Card in your member account for your health score and improvement tips. Log in at ameritas.com!

800-487-5553 group@ameritas.com www.ameritas.com

Ameritas

DENTAL PLAN 4



Plan Benefit

Type 1	100%
Type 2	80%
Type 3	50%

Monthly Cost

Employee	$42.16
Employee + Spouse	$83.40
Employee + Child(ren)	$101.00
Family	$154.56

Summary

Deductible	$50/Calendar Year (Waived Type 1) $150/family
Maximum (per person)	$1,750/Calendar year
PPO	Passive PPO & Plus
Waiting Period	None
Annual Open Enrollment	Included

Orthodontia

Plan Benefit	50%
Coverage	Children under 19 only
Lifetime Max.	$1,000
Waiting Period	None
Takeover Benefit	Initial Insureds

FEATURES & BENEFITS

DENTAL NETWORK
Ameritas offers coverage at any dentist. Find an in-network provider at dentalnetwork.ameritas.com under "Classic (PPO) & Plus".

WORLDWIDE SUPPORT
AXA Assistance provides provider referrals and appointment help for dental emergencies. Contact info is in the member account.

ORTHODONTIA
Ameritas covers current orthodontic treatment up to its maximum, minus prior benefits, for initial employees and dependents only.

DEDUCTIBLES
After $150 in deductibles, the rest are waived for the year. No family member can exceed the selected deductible amount.

COST ESTIMATOR
Members can use the estimator for procedure charges and request a pretreatment estimate from their dentist.

HEALTH SCORECARD
View your Dental Health Report Card in your member account for your health score and improvement tips. Log in at ameritas.com!

800-487-5553 group@ameritas.com www.ameritas.com

Ameritas

VISION PLAN 1



Lenses

Single Vision	Covered in Full
Bifocal	Covered in Full
Trifocal	Covered in Full
Lenticular	Covered in Full
Progressive	See lens options

Details

Frame Allowance	$120
Deductibles	$20 Exam
	$20 Eye Glass Lenses or Frame
Maximum	None

Monthly Cost

Employee	$5.88
Employee + Spouse	$11.76
Employee + Child(ren)	$12.48
Family	$19.64

FEATURES & BENEFITS

ADDITIONAL GLASSES
20% off additional complete pairs of prescription glasses and/or prescription sunglasses.

ONLINE EYEWEAR STORE
Eyeconic.com is VSP's in-network online eyewear store. Vision benefits are applied directly to the online order.

LASER VISIONCARE
VSP offers 15% off LASIK, Custom LASIK, and PRK, with max costs of $1,800, $2,300, and $1,500, respectively. A VSP provider must coordinate.

VSP SAVINGS
VSP providers offer 20% off remaining frame balances, extra glasses, non-covered lenses, and discounts on LASIK or PRK.

VSP NETWORK
VSP has the largest network of independent doctors, including Costco, Sam's Club, Visionworks, and Walmart. Find providers at vsp.com.

CONTACT ELECTIVE
Allowance covers a 3- or 6-month supply of disposables. Fitting & evaluation costs are deducted if not separate.

vsp

800-877-7195

www.vsp.com

Ameritas

VISION PLAN 2



Lenses

Single Vision	Covered in Full
Bifocal	Covered in Full
Trifocal	Covered in Full
Lenticular	Covered in Full
Progressive	See lens options

Details

Frame Allowance	$150
Deductibles	$10 Exam
	$10 Eye Glass Lenses or Frame
Maximum	None

Monthly Cost

Employee	$8.88
Employee + Spouse	$17.80
Employee + Child(ren)	$19.84
Family	$30.20

FEATURES & BENEFITS

ADDITIONAL GLASSES
20% off additional complete pairs of prescription glasses and/or prescription sunglasses.

ONLINE EYEWEAR STORE
Eyeconic.com is VSP's in-network online eyewear store. Vision benefits are applied directly to the online order.

LASER VISIONCARE
VSP offers 15% off LASIK, Custom LASIK, and PRK, with max costs of $1,800, $2,300, and $1,500, respectively. A VSP provider must coordinate.

VSP SAVINGS
VSP providers offer 20% off remaining frame balances, extra glasses, non-covered lenses, and discounts on LASIK or PRK.

VSP NETWORK
VSP has the largest network of independent doctors, including Costco, Sam's Club, Visionworks, and Walmart. Find providers at vsp.com.

CONTACT ELECTIVE
Allowance covers a 3- or 6-month supply of disposables. Fitting & evaluation costs are deducted if not separate.

vsp

800-877-7195

www.vsp.com

Sav-RX

About Sav-RX:

- Pharmacy Benefit Manager (PBM) that administers prescription benefits for self-funded plans
- Founded in 1968
- Independently owned and operated
- Committed to providing the lowest net cost, clinical excellence, and exceptional service
- National company with great resources
- High-touch, personalized member service
- Providing services for Show-Me Consortium

★★★★

Customer Service

- Live Sav-RX customer service representatives available 24/7
- Open and operational all days of the year including weekends and holidays
- No dial-around system, **LIVE** customer service representatives each time you call
- Patient portal with email messaging also available
- Customer service phone number: **800-228-3108**



Sav-RX

Member Portal

Great Features

- Secure portal
- Responsive design that adjusts to any browser size
- Quick refills without logging in
- Easy account creation to access dashboard
- Push notifications for refills
- NEW Drug Price Comparison Tool

Streamlined Access

Sav-RX Mail Order Tab

- See prescriptions in progress
- Find tracking information
- Request refills

Claim History Tab

- Search claims by date range
- Download claim history as a .pdf file

My Account Tab

- Edit all account information
- View Sav-RX ID card
- Download or print a CAA-compliant soft card
- Add a payment method for mail order prescriptions

Sav-RX Customer Service is available at **800-228-3108**.
Open 24/7/365

Drug Price Comparison Tool

Easily compare prescription medication prices at pharmacies near you with our online tool. Just enter your address, the medication you are looking for, and the quantity to quickly find the best deals and save on your prescription.

MedVed

Significantly Reducing the Price of High Cost Medications

Health Plan Benefit for Show-Me Benefit Consortium

What We Do

As your pharmacy overlay partner, we help your self-funded health plan source specialty and brand name medications at reduced pricing through our international sourcing for both the member and the plan. We assist with program enrollment and coordinate directly with international partner pharmacies to source your medications at greatly reduced prices. Participating members have ZERO co-pays when utilizing MedVed and the health plan receives discounts on it's portion of the medication cost, too!

- Medications sourced from Tier 1 countries (meet or exceed the FDA standards)- currently source from Canada, Great Britian, Australia, and New Zealand
- Pharmacies are accredited and inspected
- Medications arrive in original manufacturer sealed packaging directlyto your home, office, etc.
- Only source brand name medications with same formulary you receive locally- no substitutions
- Comply with U.S. personalimportation guidelines and are HIPAA compliant
- Many Americans do not know that "78% of active pharmaceutical ingredient manufacturers are located outside of the U.S. and imports account for about 49% of medical devices used in the U.S. and 96% of biologics" (FDA.GOV 1/29/2026).

To see if your medication qualifies for our program, call Courtney at 417-408-8352

Next Steps in Order to Support You, the Member

1. A MedVed advocate will call, text, or email (member preference) members currently receiving specialty or brand name medications to explain the voluntary international process, check on eligible medications, and answer all questions. We promise you a friendly and helpful experience.
2. MedVed advocates will then assist each member with the completion of his/her enrollment paperwork and will obtain a health care authorization allowing the advocate to request prescriptions directly from the member's doctor. International sourcing is an enrollment and all qualifying medications are accessible for members.
3. For International sourcing, MedVed will submit each member's documentation and request the member's prescription from his/her doctor for a 3-month supply with 3 refills (some high-cost medications will remain monthly fills).
4. Once enrolled in the international sourcing program, a pharmacy representative will call the member to verify information on the order prior to mailing the medication directly to the member's home.

MedVed assures complete confidentiality of all information utilized in our process and are 100% HIPAA compliant.

Contact Us With Questions:

(417) 408-8352

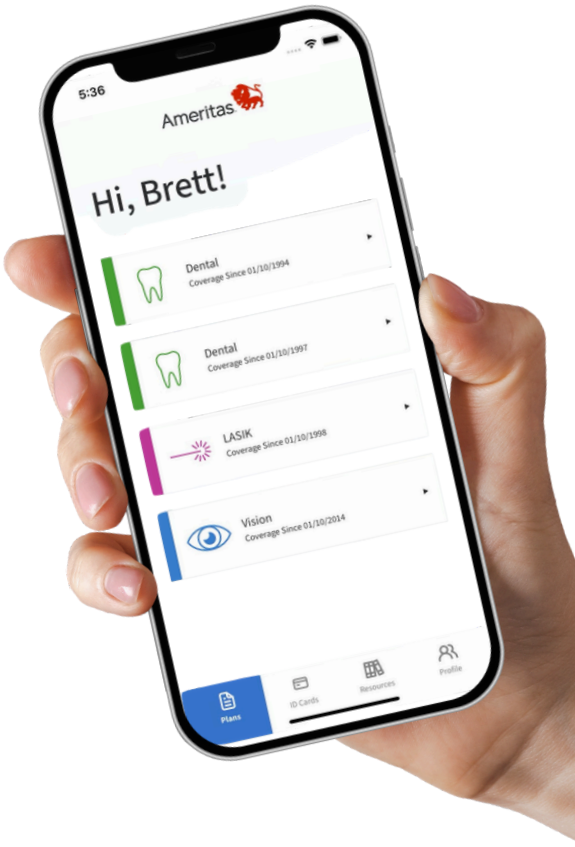
MedVedInc.com

Ameritas
Dental/Vision Care

Ameritas provides comprehensive dental and vision coverage designed to help you maintain your health. With a wide network of providers, Ameritas makes it easy to access routine dental care, including cleanings, exams, and treatments, as well as vision care like eye exams, glasses, and contact lenses, through VSP. Known for their reliable service and customer support, Ameritas ensures you have the resources to keep both your smile and your vision in top shape.

Ameritas Benefits App
Features

- View recent visits and EOBs
- Savings and plan usage
- Review patient details
- Access and send ID cards
- Find a provider
- Vision and LASIK



Find a Dental/Vision Provider

Dental

- dentalnetwork.ameritas.com
- Enter City/County, State, or Zip
- Select “Classic PPO & Plus”
- Apply additional filters if you prefer
- Hit Search
- Browse your provider options

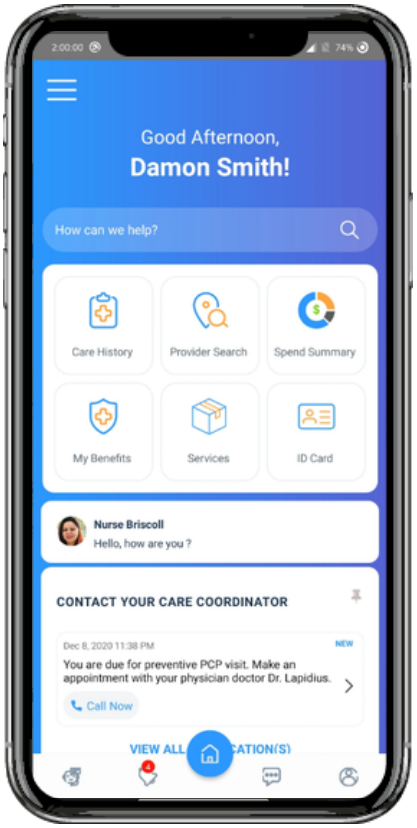
Vision

- vsp.com
- Under “Find a Doctor”, select “Search Now”
- Search by location, office, or doctor
- Put in your information
- Hit Search
- Browse your provider options

zConnect App

Your health is in your hands

zConnect. A mobile app that provides a simple and convenient way to access your personal health plan.



FIND A DOCTOR

It's easy to search for doctors, and specialists in your area. The app even gives turn-by-turn directions to get there.

VIEW CLAIM STATUS

Want a faster, easier way to view claims? Access claims status and EOB's in just a few swipes!

VIRTUAL ID CARD

Never misplace your ID card again! With zConnect, your ID card is a click away to view, download or print!

TRACK YOUR SPENDING

Knowing deductible and expense progress is important. The app shows where you are satisfying your plan year out-of-pocket spending and more!

AI CHATBOT

Don't feel like calling and waiting for a response? Use the live chat to get answers from your support teams on YOUR time!

ESTIMATE YOUR COSTS

See what nearby doctors and facilities charge for a procedure You can cost-compare provides, just like shopping online.

DOWNLOAD THE APP

Android iPhone

Download zConnect Health TODAY! You will receive an email or text from zconnect@zakipoint.com with your unique group code for registration!

By downloading the zConnect app, you may receive communications and updates about the app leading up to the new plan year. In the new plan year you have the ability to opt out from future notifications.

First Stop Health

24/7 care when you need it.

Get convenient care for your health via phone or video. Show-Me Benefit Consortium provides First Stop Health to medical-enrolled employees and their immediate family members for FREE.

On-demand doctor visits

Getting the care you need shouldn't be a pain. Our board-certified doctors are available 24/7 via phone or video!

Diagnosis & treatment

Get immediate support, including prescriptions when appropriate* for:

- Sore Throat
- Cough
- Sinus Issues
- Skin Rash
- UTI
- Rx Refill*
- Pink Eye
- Fever
- Earache
- Cold & Flu
- Medical Questions
- And more!



Activate your account

Use the last 4 digits of your SSN to claim your account!

First Stop Health



Don’t let a small health concern become a big problem.

Sinus infection while traveling? Sudden UTI? A stomachache in the middle of the night? Getting care is simple with First Stop Health Urgent Care:

24/7 care via phone or video.
Any time of day, anywhere you are. Simply request a visit on our app or website to talk to a doctor.

Quick response time.
Once you request a visit, doctors call back within 7 minutes, on average.

Ask your doctor anything.
“Does this rash look concerning?” “Which of these cough syrups works the best?” Get answers to your medical questions.

Show-Me Benefit Consortium provides urgent care to medical-enrolled employees and their immediate family members for FREE.

First Stop Health services are not intended to constitute a health plan. *Providers at First Stop Health do not prescribe controlled substances. Costs according to your medical plan may apply for prescriptions.

firststophealth.com | 888-691-7867

ALLONE HEALTH

Encompass

Employee Assistance Program

Your Assistance Program can help you reduce stress, improve mental health, and make life easier by connecting you to the right information, resources, and referrals.

All services are free, confidential, and available to you and your family members. This includes access to short-term counseling and the wide range of services listed below:

Mental Health Sessions
Manage stress, anxiety, and depression, resolve conflict, improve relationships, and address any personal issues. Choose from in-person sessions, video counseling, or telephonic counseling.

Life Coaching
Reach personal and professional goals, manage life transitions, overcome obstacles, strengthen relationships, and build balance.

Financial Consultation
Build financial wellness related to budgeting, buying a home, paying off debt, managing taxes, preventing identity theft, and saving for retirement or tuition.

Legal Consultation
Get help with personal legal matters including estate planning, wills, real estate, bankruptcy, divorce, custody, and more.

Work-Life Resources and Referrals
Obtain information and referrals when seeking childcare, adoption, special needs support, eldercare, housing, transportation, education, and pet care.

Personal Assistant
Save time with referrals for travel and entertainment, seeking professional services, cleaning services, home food delivery, and managing everyday tasks.

Medical Advocacy
Get help navigating insurance, obtaining doctor referrals, securing medical equipment, and planning for transitional care and discharge.

Member Portal
Access your benefits 24/7/365 through your member portal with online requests and chat options. Explore thousands of self-help tools and resources including articles, assessments, podcasts, and resource locators.

Contact Encompass EAP

800-788-8630
encompass.us.com
Company Code: showme

ENCOMPASS EAP
An AllOne Health Company

2026-27
SMBC Network Guide

Mercy Plans

Network Guide

Mercy
(All 33 Locations)
Citizens Memorial
Lake Regional
Ozarks Health
Baxter Regional
Golden Valley
Memorial
University Hospital
MU Orthopedic
MU Women's and
Children's

Cox Plans

Network Guide

Cox Health
(All Locations)
Burrell Health
Citizens Memorial
Ozarks Health
Baxter Regional
Golden Valley
Memorial
Wash U
Barnes Jewish
University Hospital
MU Orthopedic
MU Women's and
Children's

Cigna Plans

Network Guide

Mercy
(All Locations)
Cox Health
(All Locations)
Burrell Health
Citizens Memorial
Lake Regional
Ozarks Health
Baxter Regional
Golden Valley
Memorial
Wash U
Barnes Jewish
University Hospital
MU Orthopedic MU
Women's and
Children's

Call for other National Options

ALL PLANS

If you are in an **Emergency Situation** you can go to ANY In or Out of network Hospital and it will be considered an In-Network Benefit

Contact the SMBC Team

844-682-1545 customerservice@showmeadmin.com

SHOW-ME BENEFIT CONSORTIUM